

MRDDA Contract Administration

Policy and Procedure Number: CA201	Title: Process to Perform Ongoing Monitoring of Existing Providers
Effective Date: April 18, 2003	Revision Number: 0.0
Approvals: Bureau Chief of Contract Administration and Bureau Chief of Program Integrity	Page 1 of 1

- 1.0 Policy** All providers having MRDDA contracts shall be reviewed on a yearly basis, and monitored on a more frequent basis, if necessary.
- 2.0 Scope** The scope of this document is to establish the process for performing ongoing reviews and monitoring of Human Care Agreement (HCA), day and residential providers. The Process to Perform Ongoing Monitoring of Existing Providers shall involve the Bureau Chief of Contract Administration, the Community Based Resource Specialists, the Services Management Specialists, Case Managers, Quality Assurance Specialists, Quality Improvement Committee, Immediate Response Committee, Quality Council and Office of Contracts and Procurement (OCP). The Quality Assurance Specialists shall be responsible for tracking the dates of the reviews to ensure the timeliness of the ongoing monitoring efforts.
- 3.0 Procedures** The process is cross-functional in nature and involves all the applicable parties.
- 3.1. The Quality Assurance Specialist shall develop an annual review plan and propose a schedule for quality reviews of all ongoing providers used by MRDDA and having District of Columbia contracts.
 - 3.2. The Quality Assurance Specialist shall review the plan with the Community Based Resource Specialist for completeness, develop the review methodology and process, and schedule the on-site visits to monitor providers. The on-site review shall utilize the process and templates specified by the Quality Assurance Specialist. The on-site review shall be scheduled in a manner that offers participation by both the Community Based Resource Specialist and the Services Management Specialist. All ongoing providers shall be monitored at least once during the twelve (12) month period. This task shall be performed within ten (10) business days.
 - 3.3. Once scheduled, the Quality Assurance Specialist, the Community Based Resource Specialist, and the Services Management Specialist shall meet to decide how each party shall participate in the review. The Community Based Resource Specialist and Quality Assurance Specialist shall focus on the consumer outcomes, and the Services Management Specialist shall focus on the business and financial details to ensure contract compliance. This task shall be performed within two (2) business days.

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- 3.4. The on-site review shall include four (4) components. The first component is an opening conference with the provider, at which time the overall plan for the review shall be described. The second component is the assessment phase which consists of interviews, observation, and data review. The third component is the summary conference held at the conclusion of the review, when the results of the review are shared with the provider and corrective action timeframes are established. The final component is the development and transmittal of the review report.
- 3.5. Within five (5) business days of the review, the Community Based Resource Specialist, Quality Assurance Specialist, and Services Management Specialist shall complete a joint report. This report shall be sent by the Quality Assurance Specialist to the provider for comment, with copies to the Case Manager, the Community Based Resource Specialist and Services Management Specialist.
- 3.6. Upon receipt, the provider shall be given the opportunity to develop a corrective and preventive action plan to correct the deficiencies noted. The provider shall provide comments to the Quality Assurance Specialist on the review findings within the timeframe agreed to at the summary conference.
- 3.7. Once the Quality Assurance Specialist receives the provider's response, a meeting with the Community Based Resource Specialist and the Services Management Specialist shall be held within five (5) business days. The team shall review and approve the response or request clarifications from the provider.
- 3.8. The team shall conduct a three (3) month follow-up visit to the provider as necessary to validate the actions taken.
- 3.9. If substantial progress is not achieved by agreed-upon deadlines, the Quality Assurance Specialist shall raise the issue with the appropriate body, such as the Quality Council, the Quality Improvement Committee or the Immediate Response Committee, who shall develop a plan of action needed to resolve the situation and a deadline for correction. This task shall be performed within two (2) business days.

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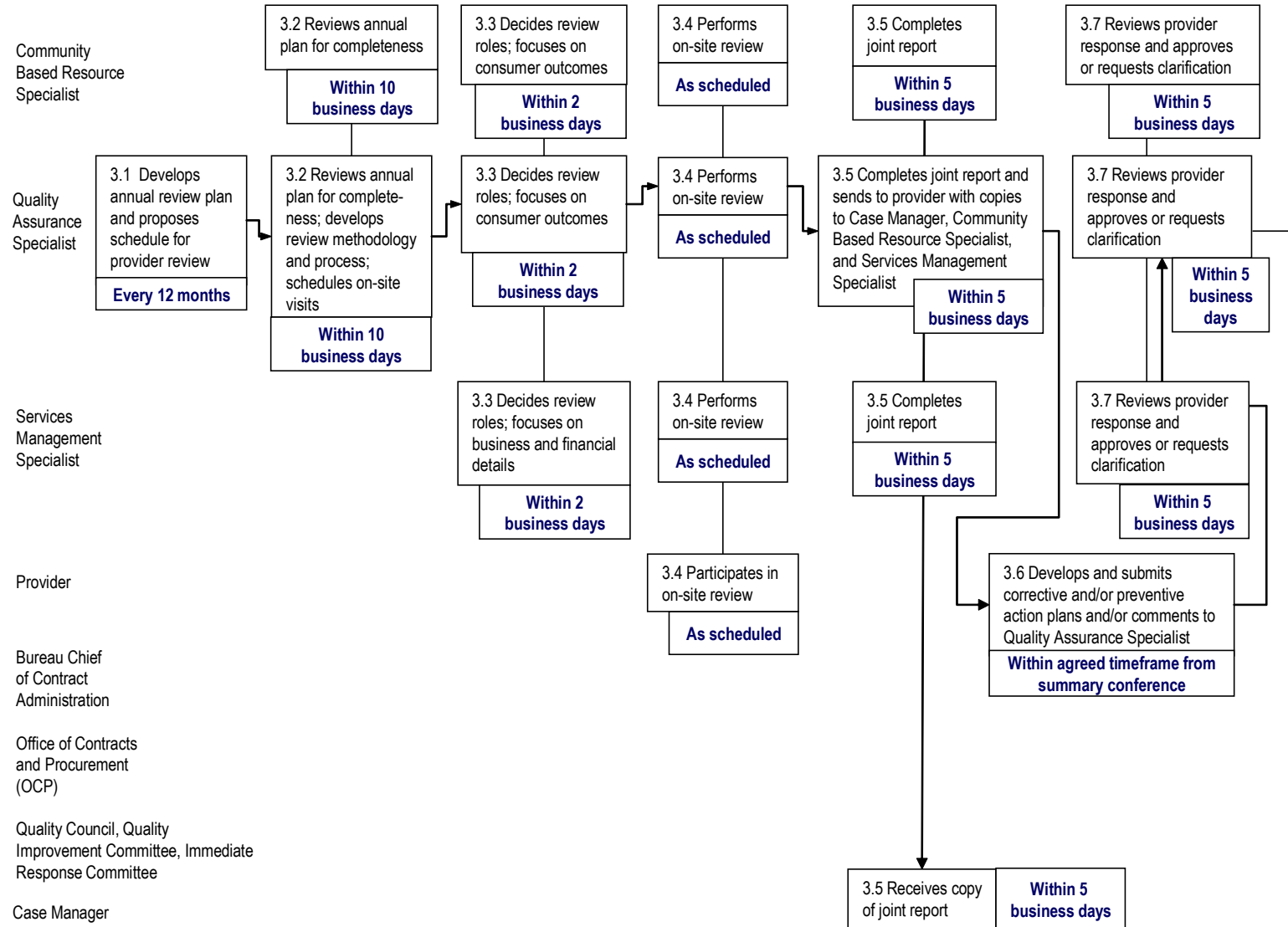
- 3.10. If progress is still unsatisfactory, the Bureau Chief of Contract Administration shall notify the OCP in writing, requesting a Cure Letter Notice be sent to the provider within two (2) business days.
- 3.11. The OCP shall send a Cure Letter Notice to provider within two (2) business days.
- 3.12. The provider shall respond to the OCP within two (2) business days with corrective actions taken.
- 3.13. The OCP shall send the provider's response to the Bureau Chief of Contract Administration within two (2) business days.
- 3.14. The Bureau Chief of Contract Administration shall forward the OCP/provider response to the Quality Assurance Specialist for their follow-up to verify corrective actions have been taken within two (2) business days.
- 3.15. The Quality Assurance Specialist shall review and verify provider corrective actions taken within two (2) business days.
- 3.16. If verified, the Quality Assurance Specialist shall inform, in writing, the Bureau Chief of Contract Administration, with a copy to the Community Based Resource Specialist. If not verified, the Quality Assurance Specialist shall send written notice to the Bureau Chief of Contract Administration. This task shall be performed within two (2) business days.
- 3.17. The Bureau Chief of Contract Administration shall forward a copy of the verification to the OCP within two (2) business days.
- 3.18. If progress is still unacceptable, the Bureau Chief of Contract Administration shall send a written request to the OCP within two (2) business days to terminate the provider for default.

4.0 Process Flow

The attached process flow chart indicates the above steps, the roles and responsibilities of the parties, the expected outcome, and the number of days allocated to each step in the process.

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